



**CROSSCONNECT**

**CUSTOMS & EVENT LOGISTICS**





May 23-26  
**TORONTO**  
aapd<sup>24</sup>



## CUSTOMS CLEARANCE INSTRUCTIONS

### INTRODUCTION

Dear Exhibitor,

**Cross Connect Customs & Event Logistics** has been appointed the **OFFICIAL CUSTOMS BROKER** for the **AAPD 2024 Annual Meeting** taking place at the **Metro Toronto Convention Centre** over the dates of **May 23-26, 2024**. We have been granted **special authority by the Canada Border Services Agency (CBSA)** to clear exhibitor shipments into Canada on a **duty-free** and **tax-free** basis. Cross Connect will ensure your customs documentation and all clearance procedures with the **CBSA** are completed correctly guaranteeing your materials arrive "on time" and in the most cost-efficient manner. Please note there are **separate procedures for importing "Medical Devices"** into Canada so please contact Cross Connect early to discuss this process and to ensure you receive the special duty-free and tax-free import privileges that can be applied to your shipment(s).

Our helpful instructions will assist you in preparing for the correct, and timely, clearance of your exhibits to and from Toronto. Using the services of Cross Connect for your round-trip customs brokerage requirements will simplify the cross-border process.

**PLEASE NOTE:** Failure to comply with the deadlines, consignee, and document instructions, will cause unnecessary delays in customs clearance and may lead to additional charges. For this reason please be sure to pass these instructions on to your Freight Forwarder or Carrier so they know to direct their clearance pre-alerts to Cross Connect.

**AAPD** and **Cross Connect Customs & Event Logistics** will not accept responsibility for late arrivals, or non-deliveries, to the venue if these guidelines and/or recommendations are not followed.

Sincerely,

Cross Connect Team

E-mail: [info@crossconnectcl.com](mailto:info@crossconnectcl.com)

Website: [www.crossconnectcl.com](http://www.crossconnectcl.com)



## PRE-ALERT / CUSTOMS DOCUMENTATION REQUIREMENTS

Please complete the Cross Connect Order Form and Commercial Invoice Packing List (CIPL) in this manual.

The CIPL should contain full detailed description of the contents, serial no.'s, customs HS/tariff codes, and quantity/weight/value of each item listed. Invoices should be in the currency of country shipped from clearly showing which items are for temporary import and which are for permanent import. Examples of both forms are provided for assistance.

The "consignee" on the Commercial Invoice Packing List should be addressed as follows:

**AAPD 2024 Annual Meeting  
(Your Exhibiting Company Name, Booth # \_\_\_\_\_)  
c/o Metro Toronto Convention Centre  
255 Front Street West  
Toronto, ON M5V 2W6  
CANADA**

**\*\*\*Please send Cross Connect draft copies of your CIPL prior to shipping so it may be reviewed and pre-approved\*\*\***

All document checks and pre-alerts should be emailed to [info@crossconnectcl.com](mailto:info@crossconnectcl.com)

**IMPORTANT:** Certain commodities such as foodstuffs, beverages, pharmaceutical products, cosmetics, certain electronic and telecommunication and military items, animal & plant products (CITES) will be subject to import licence or other certification requirements. Kindly contact Cross Connect at least 2 months prior to the show if sending any of the above items.

Failure to pre-alert us of your shipment means we are unaware it exists and cannot be held responsible for your materials arriving to the show late, or not at all.

## INSURANCE

We are not responsible for any loss, pilferage or damage while goods are left unattended at your booth. The handling of goods is carried out at the exhibitor/contractor's risk. We, therefore, strongly recommend that all exhibitors arrange insurance coverage to include transit to and from the exhibition, while also on display during the Exhibition.

## PAYMENT

Unless agreed in advance payment for all services must be made prior to, or during the show. We accept the following three methods of payment:

1. Bank Wire – Bank details can be sent upon request.
2. Credit Card – We can accept payment by credit card. Please inform us of the card details in advanced on our Customs & Transportation Order Form. Credit Card transactions are subject to a 5% service fee.
- Company Checks



# Customs & Transportation Services Order Form

Please accept this as authority for Cross Connect Customs and Event Logistics Inc. ("Cross Connect"), located at 5225 Orbitor Drive, Unit 12, Mississauga, ON L4W 4Y8; business number 709076475RM0001, a Customs Broker licensed under the Customs Act, to act as my true and lawful attorney to transact on my behalf all matters relating to the import and export of goods, as outlined in Trading Conditions applicable to Customs Services of Cross Connect Customs and Event Logistics Inc., attached hereto. Such business may include, but is not limited to:

1. The release of and accounting for goods, document and data preparation, payment of, and refund, of all government duties, taxes, and levies in respect of imported and exported goods released or to be released; and
2. The transportation, warehousing, and distribution of such goods.

In signing this form, I grant Cross Connect, full power and authority to appoint a sub-agent, where required.

This authority is granted for all shipments in relation to this event and/or shipment(s) detailed below, unless otherwise indicated by marking the "Continuous Authority" box, below.

☐ Continuous Authority granted



**CROSSCONNECT**

CUSTOMS & EVENT LOGISTICS

Tel: 416-639-2176

E-mail: info@crossconnectcl.com

## Services Required (please check all that apply):

☐ ☐ Customs Clearance ☐

Event & Exhibitor	Shipment Delivering to (please check one):		<input type="checkbox"/> Direct to Event/Show Site	<input type="checkbox"/> Advance Warehouse
	Exhibitor Name:		Booth #:	
	Event Name:		Event Dates: to	
	Facility/Venue Name:			
	Facility/Venue Address:			
	City:	State/Province:	Zip/Postal Code:	
	On-site Contact:	Cell #:		
	E-mail:	Importer # (if applicable):		

Shipper	Company Name:		IRS #:
	Address:		
	City:	State/Province:	Zip/Postal Code:
	Contact Name:	Tel:	
	E-mail:		

Return Freight	<input type="checkbox"/> Same as Shipper <input type="checkbox"/> No Return Shipment		
	Company Name:		IRS / Importer #:
	Address:		
	City:	State/Province:	Zip/Postal Code:
	Contact Name:	Tel:	
	E-mail:		

Billing	<input type="checkbox"/> Same as Shipper		
	Company Name (Legal):		GST/HST# (if applicable):
	Address:		
	City:	State/Province:	Zip/Postal Code:
	Contact Name:	Tel:	
	E-mail:		

## MUST BE COMPLETED

Payment	Charge to: <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express		
	Cardholder Name:	CVV Number:	
	Credit Card Number:	Expiry Date:	
	I authorize use of this card for payment of services relative to this form. I acknowledge that declined credit cards are subject to a 30% surcharge (minimum \$50.00 USD).		
	Cardholder Signature:	Date:	

Shipment / Freight	# of Pieces	Type of Pieces (Box/Crate/Skid, etc.)		Length	Width	Height		Per Piece	Total
			@ Dimensions (Inches) Each				@ Weight (lbs) Each		
			@ Dimensions (Inches) Each				@ Weight (lbs) Each		
			@ Dimensions (Inches) Each				@ Weight (lbs) Each		
			@ Dimensions (Inches) Each				@ Weight (lbs) Each		
			@ Dimensions (Inches) Each				@ Weight (lbs) Each		
	Requested Service Level: <input type="checkbox"/> Air <input type="checkbox"/> 2nd Day <input type="checkbox"/> Truck <input type="checkbox"/> Other: _____								
	Additional Services Required: <input type="checkbox"/> Lift Gate <input type="checkbox"/> Inside Pick-up <input type="checkbox"/> Inside Delivery <input type="checkbox"/> Weekend Pick-up <input type="checkbox"/> Weekend Delivery								
	Total Shipment Value:		Carrier Name & Contact Info:						
	Available for Pick-up Date:		Shipper Hours of Operation:		to		Must Deliver By:		

**Cargo Insurance / Declared Value**  
This shipment is subject to basic liability of the carrier or other vendors engaged, which is limited by default under applicable contract and/or law. No greater value for liability will be declared with any vendor absent written instruction by the client and written confirmation by Cross Connect. Rather than attempt to recover under liability terms, Cross Connect offers the client the opportunity to include shipments under a first party cargo insurance program which will provide protections pursuant to policy terms and conditions; a copy of the insurance policy will be provided upon request. Please contact Cross Connect for more information on cargo insurance. Shipments will not be insured absent written request and written confirmation from Cross Connect.

## Terms & Conditions

This order is placed with the specific understanding that we are engaging Cross Connect as our agent. Cross Connect performs customs services pursuant to its "Trading Conditions Applicable to Customs Services" as published online at [https://crossconnectcl.com/wp-content/uploads/2021/06/Customs\\_STC.pdf](https://crossconnectcl.com/wp-content/uploads/2021/06/Customs_STC.pdf). Cross Connect performs its transportation services in the role of agent pursuant to its "Standard Trading Conditions", as published online at [https://crossconnectcl.com/wp-content/uploads/2021/06/Transportation\\_STC.pdf](https://crossconnectcl.com/wp-content/uploads/2021/06/Transportation_STC.pdf). The foregoing terms, respectively, limit the liability of Cross Connect and provide for time limits for making claims and filing suits. Notwithstanding any greater liability under Cross Connect's "Trading Conditions Applicable to Customs Services" and "Standard Trading Conditions", the liability of Cross Connect - however founded - for any and all services performed is agreed to hereby be limited to CAD 1000 (One Thousand Canadian Dollars) per transaction or occurrence, whichever is least, and in no event shall Cross Connect be liable for any indirect or consequential damages including but not limited to any loss of profit.

The undersigned warrants that all hazardous materials have been declared, and that the client shall abide by all Federal, Provincial, State and Local laws.

## Client Signature (wet ink signature required - digital signature NOT allowed)

I have read and agree to the terms of this contract.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Printed Name: \_\_\_\_\_ Title: \_\_\_\_\_

## Cross Connect Internal Use Only

Accepted by:

Date:

Signature:



# Customs & Transportation Services Order Form

Please accept this as authority for Cross Connect Customs and Event Logistics Inc. ("Cross Connect"), located at 5225 Orbitor Drive, Unit 12, Mississauga, ON L4W 4Y8; business number 709076475RM0001, a Customs Broker licensed under the Customs Act, to act as my true and lawful attorney to transact on my behalf all matters relating to the import and export of goods, as outlined in Trading Conditions applicable to Customs Services of Cross Connect Customs and Event Logistics Inc., attached hereto. Such business may include, but is not limited to:

1. The release of and accounting for goods, document and data preparation, payment of, and refund, of all government duties, taxes, and levies in respect of imported and exported goods released or to be released; and
2. The transportation, warehousing, and distribution of such goods.

In signing this form, I grant Cross Connect, full power and authority to appoint a sub-agent, where required.

This authority is granted for all shipments in relation to this event and/or shipment(s) detailed below, unless otherwise indicated by marking the "Continuous Authority" box, below.

☒ Continuous Authority granted



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CUSTOMS & EVENT LOGISTICS

Tel: 416-639-2176

E-mail: [info@crossconnectcl.com](mailto:info@crossconnectcl.com)

## Services Required (please check all that apply):

☐ ☒ Customs Clearance ☐

Event & Exhibitor	Shipment Delivering to (please check one):	<input type="checkbox"/> Direct to Event/Show Site	<input checked="" type="checkbox"/> Advance Warehouse	
	Exhibitor Name:	ABC COMPANY		
	Event Name:	AAPD 2024 ANNUAL MEETING		
	Facility/Venue Name:	METRO TORONTO CONVENTION CENTRE		
	Facility/Venue Address:	255 FRONT STREET WEST		
	City:	TORONTO	State/Province:	ON
	On-site Contact:	JOHN SMITH	Zip/Postal Code:	M5V 2W6
	E-mail:	JSMITH@DOMAIN.COM	Cell #:	555-555-0000
		Importer # (if applicable): 123456789RM0001		

Shipper	Company Name:	ABC COMPANY		IRS #:	12-3456789	
	Address:	123 SOMEPLACE AVENUE, SUITE 3				
	City:	NEW YORK	State/Province:	NY	Zip/Postal Code:	10093
	Contact Name:	JOHN SMITH		Tel:	555-555-0000	
	E-mail:	JSMITH@DOMAIN.COM				

Return Freight	<input checked="" type="checkbox"/> Same as Shipper <input type="checkbox"/> No Return Shipment					
	Company Name:	ABC COMPANY	IRS / Importer #:	12-3456789		
	Address:	123 SOMEPLACE AVENUE, SUITE 3				
	City:	NEW YORK	State/Province:	NY	Zip/Postal Code:	10093
	Contact Name:	JOHN SMITH		Tel:	555-555-0000	
	E-mail:	JSMITH@DOMAIN.COM				

Billing	<input checked="" type="checkbox"/> Same as Shipper					
	Company Name:	ABC COMPANY	GST/HST# (if applicable):	123456789RM0001		
	Address:	123 SOMEPLACE AVENUE, SUITE 3				
	City:	NEW YORK	State/Province:	NY	Zip/Postal Code:	10093
	Contact Name:	JANE DOE, ACCOUNTS PAYABLE		Tel:	555-555-0001	
	E-mail:	JDOE@DOMAIN.COM				

## MUST BE COMPLETED

Payment	Charge to:	<input checked="" type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express		
	Cardholder Name:	JOHN SMITH	CVV Number:	123
	Credit Card Number:	1234 5678 9123 4567	Expiry Date:	11/24
	I authorize use of this card for payment of services relative to this form. I acknowledge that declined credit cards are subject to a 30% surcharge (minimum \$50.00 USD).			
	Cardholder Signature:	<i>John Smith</i>		
	Date:	10-Jun-21		

# of Pieces	Type of Pieces (Box/Crate/Skid, etc.)		Length	Width	Height		Per Piece	Total
2	SKIDS	@ Dimensions (Inches) Each	48	48	48	@ Weight (lbs) Each	400	800
1	CRATE	@ Dimensions (Inches) Each	41	52	50	@ Weight (lbs) Each	1,000	1,000
		@ Dimensions (Inches) Each				@ Weight (lbs) Each		
		@ Dimensions (Inches) Each				@ Weight (lbs) Each		
3		@ Dimensions (Inches) Each				@ Weight (lbs) Each		1,800

Shipment / Freight	Requested Service Level:	<input type="checkbox"/> Air <input type="checkbox"/> 2nd Day <input checked="" type="checkbox"/> Truck <input type="checkbox"/> Other: _____		
	Additional Services Required:	<input checked="" type="checkbox"/> Lift Gate <input type="checkbox"/> Inside Pick-up <input type="checkbox"/> Inside Delivery <input type="checkbox"/> Weekend Pick-up <input type="checkbox"/> Weekend Delivery		
	Total Shipment Value:	\$ 10,000.00	Carrier Name & Contact Info:	BUFFALO TRANSPORT
	Available for Pick-up Date:	15-Jun-21	Shipper Hours of Operation:	8:00 am to 4:00 pm Must Deliver By: 30-Jun-21 @ 4:00 pm

### Cargo Insurance / Declared Value

This shipment is subject to basic liability of the carrier or other vendors engaged, which is limited by default under applicable contract and/or law. No greater value for liability will be declared with any vendor absent written instruction by the client and written confirmation by Cross Connect. Rather than attempt to recover under liability terms, Cross Connect offers the client the opportunity to include shipments under a first party cargo insurance program which will provide protections pursuant to policy terms and conditions; a copy of the insurance policy will be provided upon request. Please contact Cross Connect for more information on cargo insurance. Shipments will not be insured absent written request and written confirmation from Cross Connect.

## Terms & Conditions

This order is placed with the specific understanding that we are engaging Cross Connect as our agent. Cross Connect performs customs services pursuant to its "Trading Conditions Applicable to Customs Services" as published online at [https://crossconnectcl.com/wp-content/uploads/2021/06/Customs\\_STC.pdf](https://crossconnectcl.com/wp-content/uploads/2021/06/Customs_STC.pdf). Cross Connect performs its transportation services in the role of agent pursuant to its "Standard Trading Conditions", as published online at [https://crossconnectcl.com/wp-content/uploads/2021/06/Transportation\\_STC.pdf](https://crossconnectcl.com/wp-content/uploads/2021/06/Transportation_STC.pdf). The foregoing terms, respectively, limit the liability of Cross Connect and provide for time limits for making claims and filing suits. Notwithstanding any greater liability under Cross Connect's "Trading Conditions Applicable to Customs Services" and "Standard Trading Conditions", the liability of Cross Connect - however founded - for any and all services performed is agreed to hereby be limited to CAD 1000 (One Thousand Canadian Dollars) per transaction or occurrence, whichever is least, and in no event shall Cross Connect be liable for any indirect or consequential damages including but not limited to any loss of profit.

The undersigned warrants that all hazardous materials have been declared, and that the client shall abide by all Federal, Provincial, State and Local laws.

## Client Signature

I have read and agree to the terms of this contract.

Signature: *John Smith*

Printed Name: JOHN SMITH

Date: 10-APR-24

Title: CEO

## Cross Connect Internal Use Only

Accepted by:

Date:

Signature:



**CARRIER ONLY PARS E-mail: [pars@crossconnectcl.com](mailto:pars@crossconnectcl.com)**

**HOURS:** Mon-Fri 9 am - 5 pm \*E-mails are monitored outside of regular business hours, but response may be delayed. Please ensure that ETA's are accurate.

[illegible]

**FOB VALUE:	
INSURANCE:	
FREIGHT CHARGE:	
<b>**TOTAL CIF VALUE:</b>	

The shipper hereby authorizes Cross Connect Customs and Event Logistics, inc. ("Cross Connect"), and their agents, in his name and behalf, to prepare any export documentation, to sign and accept any documents relating to said shipment and forward this shipment in accordance with the Cross Connect's "Standard Trading Conditions", as published online at [https://crossconnectcl.com/wp-content/uploads/2021/06/Transportation\\_STC.pdf](https://crossconnectcl.com/wp-content/uploads/2021/06/Transportation_STC.pdf) . The values listed on this document represent fair-market value, and proof of valuation can and will be provided upon request.

Signature: \_\_\_\_\_

Date:

12/22



**COMMERCIAL INVOICE / PACKING LIST**



**CROSSCONNECT**  
 CUSTOMS & EVENT LOGISTICS

NOTE: Only pdf/tif attachments and not the email itself are received. Ensure that all PARS information and any special instructions are included within pdf/tif attachment.  
 HOURS: Mon-Fri 9 am - 5 pm \*E-mails are monitored outside of regular business hours, but response may be delayed. Please ensure that ETA's are accurate.

**\*IMPORTANT:**  
**MUST be completed in full.**

<b>Shipper:</b> ABC COMPANY 123 SOMEPLACE AVENUE, SUITE 3 NEW YORK, NY 10093  JOHN SMITH - 555-555-0000	<b>Consignee (Ship To):</b> ABC COMPANY, BOOTH # 1001 C/O AAPD 2024 METRO TORONTO CONV. CTR. 255 FRONT STREET WEST TORONTO, ON M5V 2W6 CANADA JOHN SMITH - 555-555-0000	<b>Importer/Owner of Goods:</b> <input checked="" type="checkbox"/> Same as Shipper ABC COMPANY 123 SOMEPLACE AVENUE, SUITE 3 NEW YORK, NY 10093  JOHN SMITH - 555-555-0000  Does this company have a Canadian Office? No	<b>Shipped Via:</b> TRANSPORTATION COMPANY NAME <b>Shipped To:</b> <input checked="" type="checkbox"/> Adv. Whse <input type="checkbox"/> Show Site <b>IRS #:</b> 12-3456789 <b>Pieces:</b> 3 <b>Weight:</b> 1,800 <input type="checkbox"/> kg <input checked="" type="checkbox"/> lbs <b>Currency:</b> USD <b>Ship Date:</b> 06/15/2021 (mm/dd/yyyy)	<b>*REMARKS</b> ("X" each item)  *A - TEMPORARY IMPORT *B - PERMANENT IMPORT *C - GIVEN AWAY / SOLD
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# of Pieces	Type of Pieces	Qty	Description of Contents <small>Please include Brand Name &amp; Model # for all electronic equipment.</small>	Origin	Weight in lbs (lbs/kg)	Dimensions (Inches)			CBM	HTS	Remarks*			Value	
						L	W	H			A TEMP	B PERM	C PROMO	Unit Value	Total Value
1	SKID	1	DISPLAY BOOTH	USA	400	48	48	48	1.81	9403.20	X			5,250.00	5,250.00
1	CRATE	2	50" LED TV'S - LG MODEL# 55EG9100	CHINA	50	41	52	50	1.75	8528.72	X			700.00	1,400.00
		2	WEIGHTED METAL TV STANDS	JAPAN	950					9403.20	X			500.00	1,000.00
1	SKID	5000	ADVERTISING LITERATURE	USA	200	48	48	48	1.81	4911.10			X	0.15	750.00
		1000	BALL POINT PENS	CHINA	48					9608.10			X	0.35	350.00
		400	CATALOGS	USA	150					4911.10			X	3.00	1,200.00
		2	POSTERS	USA	2					4911.91		X		25.00	50.00

**\*Electronic equipment MUST include Brand Name & Model #.**

**\*Each commodity MUST be listed on its own line; DO NOT group items.**

**\*Specific descriptions required; Vague descriptions such as "Give Aways", "Display Materials", or "Trade Show Samples" will NOT be accepted.**

**\*Values need to reflect the cost of goods (price paid), or the selling price of the goods (price payable); whichever is greater.**

**\*\$0 values will NOT be accepted.**

**\*Indicate the Country of Manufacture (where the goods are made); NOT the country of purchase.**

**\*\*FOB (Free On Board) VALUE:** indicates the cost of goods, including all transportation and insurance costs up to the port of departure; the "Price Paid"

**\*\*CIF (Cost, Insurance, and Freight) VALUE:** indicates the value of the goods including freight and insurance from the port of departure; FOB Value + Insurance + Freight

<b>**FOB VALUE:</b>	10,000.00
<b>INSURANCE:</b>	
<b>FREIGHT CHARGE:</b>	
<b>**TOTAL CIF VALUE:</b>	10,000.00

The shipper hereby authorizes Cross Connect Customs and Event Logistics, inc. ("Cross Connect"), and their agents, in his name and behalf, to prepare any export documentation, to sign and accept any documents relating to said shipment and forward this shipment in accordance with the Cross Connect's "Standard Trading Conditions", as published online at [https://crossconnectcl.com/wp-content/uploads/2021/06/Transportation\\_STC.pdf](https://crossconnectcl.com/wp-content/uploads/2021/06/Transportation_STC.pdf). The values listed on this document represent fair-market value, and proof of valuation can and will be provided upon request.

TEMPORARY IMPORT VALUE: 7,650.00

PERMANENT IMPORT VALUE: 2,350.00

Signature: John Smith

Date: 06/10/2021